

BAKER BOTTS LLPPlease type a plus sign (+) inside this box → ☐**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

| | |
|------------------------|-------------------------|
| Application Number | 09/150,947 |
| Filing Date | Sept. 10, 1998 |
| First Named Inventor | Kaempfer |
| Group Art Unit | 1645 |
| Examiner Name | Navarro |
| Attorney Docket Number | A31967-PCT-USA-A 066031 |

ENCLOSURES (check all that apply)

- | | | |
|--|---|--|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Sequence Listing 2. Diskette 3. copy of Notice to Comply |
|--|---|--|

Remarks ☐**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

| | | |
|-------------------------|--|--|
| Firm or Individual name | BakerBotts LLP 30 Rockefeller Plaza New York, NY 10112 | |
| Signature | | Att Name: Alicia A. Russo PTO Reg: 46,192 |
| Date | May 16, 2003 | |

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: May 16, 2003

| | | |
|-----------------------|-----------------|-------------------|
| Typed or printed name | Alicia A. Russo | |
| Signature | | Date May 16, 2003 |